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THE GREAT POPE OF THE MISSIONS HAS GONE TO HIS HEAVENLY REWARD!

From a mere glance over the titles of the encyclicals issued by Pope Pius XI, one can gather that he was interested in every phase of life. His solicitude extended to body and soul—both so intimately connected.

At the great Vatican Mission Exhibition held in 1925, he desired to have a Medical section, and when viewing it, he exclaimed: *"We are living in times when unenlightened heroism is not enough!"*

In a private audience granted to our Sisters, the Holy Father said to them: *"Your Society responds to my thought and desire. . . . We rejoice that you have consecrated your lives to such a noble work, and we hope that your example will be followed by many."*

Perhaps one of the most touching incidents in the Holy Father's life is his action on behalf of the health and welfare of the mothers and children in the missions. He deemed it worthwhile to sanction what was literally an innovation in order to bring to them skilful assistance by consecrated servants of Christ.

Three groups of our Sisters cherish the memory of a private audience with the great Pope of the Missions. The last one was in a room hung with a large tapestry depicting the parable of *"The Good Samaritan."* It was a memorable experience in an unforgettable setting!

Motherhood Is Something Holy

By

ELEANOR LIPPITS, S.C.M.M., M.D.

Wherever a mother first beholds her newborn child, whether in western metropolis or African forest, she witnesses a masterpiece of God's creation in which she cooperated: a lovable little body animated by an immortal soul, created after God's own likeness and destined to live on for all eternity. Motherhood is something holy!

In our western world, the sterile surroundings available in our efficiently equipped modern hospitals and the array of analgesic agents which we have at our disposal make motherhood relatively safe and easy. But in countries where primitive conditions prevail, this is a time of hazard and unnecessary suffering, all too often accentuated by barbaric practices springing from superstition and ignorance.

India

Not the least among the legacies of Pius XI, the "Pope of the Missions," is the Decree, issued on the Feast of Our Lady of Lourdes in 1936, in which provision is made for the care of mothers and children in mission lands. In it is seen the youthful adaptability of the Church's age-old standards, and her beautiful solicitude for the whole human race. "It has always been the practice of this Sacred Congregation to have the methods of the apostolate conform to the varying needs of time and place"—and now the Church desires medical missionaries to go out as qualified doctors and nurses and dedicate themselves to health work!

The magnitude of the problem of maternity and child welfare work in the missions can be gauged to some extent from the vital statistics. In 1936, maternal deaths in India were estimated as between 150,000 and 180,000, although these are only approximate figures. Again, in the United States we have more than one million hospital beds available, while India can count only 21,456 hospital beds for its 160 million women, and has only approximately 4,000 women trained as dhais to assist at births which mount annually to about 10 millions. In others mission countries conditions are not much better.

Along with this waste of life there takes place an even greater waste of health. The number of women disabled as a result of motherhood may be taken as not less than 30 percent, according to the Commissioner of Public Health of India. In a country with such a high birth rate, this represents an appalling total.

To the physical disabilities from which these mothers suffer must be added the loss of happiness and the less tangible though not less important damage to stability of temperament which follow in the wake of neglect of the education and care of mother and child. "There is an interdependence," writes Surgeon General Dr. Thomas Parran, "between measures directed towards improving maternity and child health and those directed toward improving the general health."

In the missions as well as here, the three main causes of maternal deaths are sepsis, hemorrhage and toxemias. In a recent survey in Calcutta, these were found to account for 80 percent of all maternal deaths. As these causes can be largely prevented by adequate prenatal care and supervision, it follows that in the missions also we must aim at establishing such clinics.

It is interesting to follow the development of

our modern conception of maternal welfare. Already in 1584, a French physician, Scevola de Saint-Marthe, advocated prenatal care in a Latin poem entitled "Paedotrophia." It opens with the lines:

"Don't till 'tis born defer thy pious care,
Begin betime, and for its birth prepare."

It was only during the last century, however, that formal prenatal clinics were introduced. They were developed first in 1858 in the Maternity Hospital in Dublin. So many patients would apply to this hospital for admission at the time of confinement that it became necessary for them to make reservations several months in advance. Their reservation cards had to be signed by one of the physicians of the hospital, who took this occasion to make a brief record and physical examination. The hospital authorities found that this procedure prevented many difficulties later, and eventually required it of all their patients.

Garoland

Africa

An effort along these lines has been made in India, where maternity and child welfare centers have been established in various cites. These are based on a system of home visiting, and approximately three hundred trained health visitors are now employed. This is only a small beginning, a mere drop in the bucket, compared to the number of births which, as previously stated, annually reach a figure of about ten millions.

Since 1930 the Medical Mission Sisters have taken their place in this scheme in the city of Dacca, Bengal, where they are working as Health Visitors, and at present supervise three maternity and child welfare centers. Not only do the mothers receive advice and treatment at these centers, but they also receive instruction in hygiene and baby care, while milk stations provide the necessary food. In this way much suffering has been relieved and much misery prevented. A similar work is now being carried on in Rawalpindi.

In 1929, China inaugurated a plan for training fifty thousand maternity nurses within a certain length of time. However, due to present war conditions, this scheme probably is not being realized. As for Africa, these stirring words from the above-mentioned Decree speak volumes: "In Africa whole tribes are in danger of extinction due to inadequate aid for mothers and children."

Indeed, there is a crying need all over the mission field for sisters, trained as doctors and nurses, to come to the aid of the mothers and their children. There is an interdependence between all mission health work and missionary activity *per se,* as is expressed in the old Latin proverb: "Mens sana in corpore sano." The care of the sick being an integral part of Christianity, is an essential factor in the work of the propagation of the Faith.

In 93 percent of the maternal deaths investigated in Calcutta, there was an avoidable factor present. This finding has been arrived at as a result of a statistical inquiry into the causes of maternal mortality lately carried out by the All-India Institute of Hygiene and Public Health with the help of a grant from the Indian Research Fund Association.

China

Cases of maternal deaths were collected from all deaths between 10 and 50 years registered in the area under the control of the Health Officer of the Corporation of Calcutta. Eight hundred and eighty-seven maternal deaths were investigated, of which 701 were found to be due directly to motherhood and the remaining 186 to diseases associated with it. . . . Pulmonary tuberculosis was responsible for 40 percent of deaths from diseases associated with child-bearing.—THE CIVIL AND MILITARY GAZETTE, February 7, 1939.

High Spots On A Mission Cruise

By
ANNA DENGEL, S.C.M.M., M.D.

Peiping

The *SS. Reliance* arrived in Tientsin with her usual punctuality and we were delighted to see the familiar faces of our fellow passengers again and to exchange experiences. It was already dark when our train drew into Chien Men station, Peiping; however, we did not mind that in the least because our transportation to the hotel and accommodations had been all arranged. My friend and I were assigned to the Hotel Pekin, and to our delight discovered that we were within walking distance of the Church of St. Michael.

That night our slumber was sound; we were extremely tired. Yet the four days ahead of us in Peiping proved still more strenuous than the past few days. To get even a cursory bird's-eye view of the most history-laden city of the Orient required some flying about! Peiping has been a city for three thousand years, and a capital and an archbishopric for more than five hundred. In addition to the accumulation of landmarks which such a past would bring, there were geographical difficulties to be coped with: Here there were cities within cities, spread out over a vast area which was inclosed in a massive wall, fourteen miles in circumference and perforated by sixteen gates.

". . . the most sacred edifice of China, the Temple of Heaven."

To describe the topography in general is like a problem in division and sub-division. A wall separates the city into two main parts, the *Inner* or *Tartar* (Manchu) *City,* and the *Outer* or *Chinese City.* Within the *Inner City* is the *Imperial City,* surrounded by a red brick wall; within this again is the *Old Imperial City,* and in the center of this, like the seed in the core in the pulp in the rind, is the walled and moated so-called *Forbidden City.* The *Tartar City* had been the dwelling place of members of the royal family and of high officials; the *Forbidden City,* the residence of the emperor and his family. The latter, now open to visitors, could well be termed a *Dead City,* devoid of inhabitants, and reduced to a tourist "hunting ground."

We went from building to building; it seemed endless. In the central group were throne rooms and audience halls; clustered around like gems encircling a crown jewel, were temples and palaces and museums, sheltering priceless paintings, exquisite porcelains, massive bronze figures, clocks delicately constructed —remnants of a glory and civilization now past. Every building was different, yet all so much alike that it was impossible to get a clear idea of their purposes. Color, however, gave us some clue: Imperial palaces had yellow tiled roofs; mandarin's dwellings, blue; and temples, green.

The *Outer* or *Chinese City* was full of life and business. We were invited—with a purpose, of course—to visit the curio shops and to view paintings, mandarin coats, furs, rugs, lanterns and jewels. Jade, so valued by the Chinese as a charm which protects from evil, was displayed in a variety of colors, many of the pieces delicately carved. The most common were a grayish-green; the most highly prized, however, were specimens of mutton-fat-like white and of apple green.

The *Chinese City* harbors the most sacred edifice of China, the Temple of Heaven. It is of pleasing proportions and architecture. The round body of the building is of lacquered wood; its three-tiered roof is blue and capped with a gilded ball. It was built by a Ming emperor in the fifteenth century, and enlarged by a Tsing emperor in the eighteenth. There are

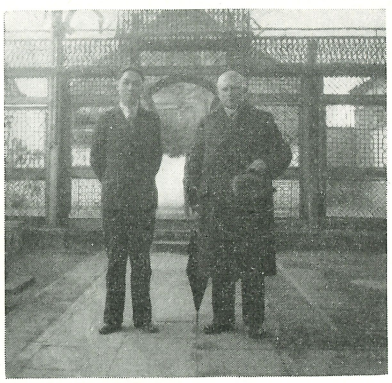
no idols in the interior, but merely a tablet representing the presence of the Supreme Being. This reminded me somewhat of the practices of the elite of the Hindus who believe in one god—or rather in the *trimurtri* (Trinity)—and ridicule the idea of many gods; yet they hold that the masses are not capable of such exalted beliefs and must have a pantheon of many deities. Scholars in China follow Confucius, who confirmed the worship of ancestors, saying that it ought to be done because it had been handed down by tradition. Lao-tse and Buddha also have had great influence through the centuries. Their disciples, however, have borrowed much from each other, and their teachings are now so mixed that there seems little difference in practice. Both sects have degenerated into the worship of idols, the use of charms and the practice of divination. Such was not the idea of Lao-tse, founder of Taoism, who has left one small book in which it is clear his thought is highly metaphysical and more akin to the speculations of Western pagan philosophers than to those of his magic-working followers.

On a marble altar close by the Temple, the emperors, as lords of heaven, offered sacrifice and prayers on New Year's Day to the Supreme Being. Our guide pointed out to us that the Chinese consider this spot the center of the world. He also mentioned that the Chinese year has only 360 days, and that every fourth year there is an extra month.

Another temple close to the Temple of Heaven is dedicated to the first farmer of the country, said to have lived in 3000 B. C. Every spring the emperors went to this sanctuary of agriculture to sow and plow, and thus set an example to the people. They seem to have succeeded pretty well, considering that to this day 85 percent of the nation's 450 millions consists of peasant families.

Another shrine we visited, situated at the other end of the city, however, was the Lama Temple. Its best days seemed to be over. With the decline of religion and political upheavals, the number of monks had dwindled from between one and two thousand to a few hundred, and they were no longer able to keep up the vast establishment. These monks were under the authority of the Dalai Lama of Tibet, and it was customary to take the remains of every one of them back to his native land. As a reminder of home, they cherished a huge Buddha hewn out of a mighty tree which once upon a time had stood on the slopes of the Himalayas. How it could have been transported so far is a mystery; it is one of those technical feats of so-called "primitive times"!

Not far distant was the temple of the sage whose ethical principles have molded China for twenty-four centuries. There were no monks to show us around the temple of Confucius, for since his maxims constitute a teaching and not a religion, priests are not required. Giant cypresses of striking dimensions, lent a venerable beauty to the spot, and in their shadow we found one of the most remarkable libraries in the world: the nine Chinese classics all hewn in stone. A Manchu emperor had had all the books burned at the instigation of the enemies of philosophy, but "the friends of wisdom" were able to rewrite them from memory, because classical education had demanded of students from time immemorial that they learn all the classical books by heart.



Dr. Lo (left) and Dr. Knack

On the morning of our second day in Peiping, we called on his Excellency, Archbishop Zanin, the Apostolic Delegate of China. Although Italian, he spoke perfect French. We were introduced to his Excellency by the Rev. Father Rutten, of the Scheut Fathers, who shortly before had conducted an extensive investigation of the medical needs of China, and who is a prime mover of medical missions in that country. His Excellency already knew of our Society and received us most kindly. It was from his lips that I heard the grand and glorious and far-reaching news of the Decree, issued a few weeks previously on February 11, not only allowing but urging sisters to devote themselves to the care of mothers and children in non-Christian lands—to alleviate their sufferings by bringing all the devotedness of religion and all the available means of science to the task. Rev. Frederick C. Dietz, M.M., then secretary of the Chinese Synodal Commission, and editor and director of *Lumen News Service,* presented me with my first copy of this Decree.

His Excellency told me of the organization of the Catholic Medical Center, and it was my good fortune to meet the men then in charge, Dr. Knack and Dr. Lo. It was quite evident that Archbishop Zanin was deeply interested in the development of medical missions in China. A letter addressed to the bishops of China some time ago, shows how thoroughly the needs have been studied, and how urgent they are.

Training For Service

Sister M. Magdalene Passes an Examination

By

SISTER M. LAETITIA, S.C.M.M., R.N.

Slowly, wearily, the hours dragged by on leaden feet. Long, long ago—so it seemed to Sister Magdalene—she had been called to the home of this young mother. When she had arrived, she had found the doorway blocked by a huge buffalo, which looked at her belligerently as though about to charge. However, the united coaxing and pushings of most of the neighbors had persuaded it to alter its mind and move a few inches to the side, so that she had been able to crawl through the opening, though keeping an apprehensive eye on Mrs. Buffalo during the process!

It had taken her a few minutes to become accustomed to the darkness of the stuffy little hut, innocent of the shadow of a window. A cow-dung fire, emitting clouds of acrid, yellow smoke, did noth-to increase visibility. After shooing out an obstreperous chicken, she had approached the patient, who was lying on a sack on the mud floor, pale and worn from many sieges of malaria, want of food and want of sun and air (in a land where the sun blazes down almost 365 days a year).

Sister M. Magdalene, R.N., with three of her charges, one a Christian, one a Mohammedan and the third a Hindu

Sister Magdalene had been struggling all night to prevent the two lives from slipping through her fingers. Now is looked as though her efforts were to be successful, and a little later, as she placed the first-born son in the tremulous arms of the happy mother, she felt rewarded for the decision which had made her add the course in obstetrics to her general training.

From her long experience as a nurse, Sister had realized that she could do a great deal more to help the Indian women if she took such a course. Accordingly, she studied at Holy Family Hospital, and some weeks ago she passed the Government examination in this branch of nursing. Now she is able to place her skill and knowledge at the disposal of all who call on her, realizing those words of the Decree of February 11, 1936, that in this delicate service "the religious must see a noble expression of Christian charity . . . a charitable work destined to ease bodily misery and to open the way for the grace of Redemption. . . ." Surely the Keeper of the Keys will lend an approving ear to the sister knocking at the gates of heaven who can say: "Peter, there are a thousand—ten thousand—twenty thousand—more denizens of heaven than there would have been if I had not been equipped to serve Christ in His little ones!"

Checking over the reports of our work, we find that the Medical Mission Sisters have issued 903 tickets to St. Peter's gate during the year 1938.

A man who wills can do more than 10 who must.

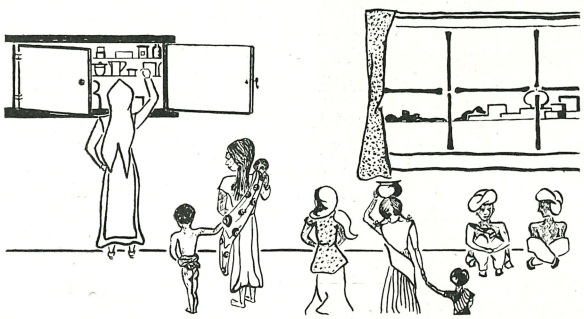
So the Mice Won't Play!

My First Day at St. Francis Dispensary

By
SISTER M. VINCENT, S.C.M.M.

While the cat's away, so the old saying goes, the mice will have a good time—but that only shows how shortsighted old pussy was. If she had arranged with her neighbor to keep an eye on things during her absence, the little fellows would have had to behave, and puss would not have lost her happy home. That is the way the Medical Missionaries arrange things here in Pindi: when one Sister goes way, another must step into her shoes—or at least into her foot-prints. So it was that when Sister Ann left for the hills in Murree, I found myself in charge of St. Francis Dispensary for a whole month!

The first morning was something of an event. Very promptly at 7:15, one of the native sisters and I left the hospital to begin the day's work. It was only fifteen minutes later that we arrived at the dispensary, but already a patient was on hand, waiting for us! We opened the doors, and I turned to the medicine cupboard to see what would be needed: cotton, bandages—but that was as far as I got! Before I could even so much as reach for anything, the room was full of children, all shouting and clamoring for something



"I got them lined up in some sort of order. . . ."

at once. The first thing was to get them quiet—the second, to keep them that way. There were twelve to begin with; I got them lined up in some sort of order and then "consultations" began!

The first little lassie silently showed me her foot, but there was so much mud on it that even admitting that skin was somewhere present was a matter of faith. There was nothing to do but wait until the water got warm on our little stove, and then start a searching party for the alleged foot with the aid of soap and brush. The patient was quite resigned, and squatted over at one side while her place was taken by the next in line.

The "next" proved to be two patients, a four-months'-old baby on the hip of her small sister. The eyes of the infant were in a pitable condition—even for India. Pus was running out of them, and there was no attempt to shoo away the flies that clustered busily about. It seemed like I used at least half a pound of cottol-wool trying to get those eyes clean, for the eyelashes were stuck fast. The little one who was acting as nursemaid had no less than sixteen infected bites on her legs and arms. Sister took care of her while I was tending to the baby, and painted the sores with medicine which happened to be of a very pretty color. Not more than three minutes after the pair had been sent away satisfied, there was a sudden invasion of new patients! The color of the "medicine" had taken the eyes of the children playing near-by, and they all clamored to have some of the "pretty paint" applied to their arms and legs!

Most of the children had enteritis, which is very common at this time of the year. Some had temperatures as high as 103° and above, and they looked oh, so miserable. I gave them medicine and told them to return the next day. As soon as they were taken care of, they apparently went home to tell their mothers—or rather, I think I would be safe in saying that they told every mother they met! The sudden influx could never have represented the maternal parents of those first few patients! They came with their babies, their toddlers, their children of five and six and seven, to have them weighed and examined. Eyes had to be looked at, throats painted, advice given on all sides about diet, treatments, etc. We worked steadily until about 10:30 a. m.

In the meantime, our water had warmed and we were able to return to our first patient, the little miss of the aching foot. We found the foot—but that was all, and so I sent her on her way. In no time there was a fresh set of youngsters, this time all alleging some indisposition of the feet and demanding warm water to prove their contentions. We soaked them and cleaned them, but in most cases I could not see anything wrong, even when they were clean! However, I suppose they found it a convenient way of getting a foot-bath!

Just as we were preparing to leave, a procession came in: four boys looking very much like small pall-bearers carrying a fifth who, I could tell from the howling, was far from being a corpse! Behind were at least thirty other boys,

all from the Mohemmedan school across the road. I caught the fact that something was broken, and at once my eyes flew around the room for prospective splints—for it must be a fractured leg! Over near the stove there was an old wooden box that could be broken up easily, or I could even use our umbrellas! Of course, I was sorry for the lad, but it would be a real pleasure to be able to practice my first aid once more. (Note: Sister Vincent was an enthusiastic member of St. John's Ambulance in Dublin, Ireland, before she became a Medical Missionary.)

With great care I laid the little fellow down and at once began my search for signs of the fracture (that is not difficult, since the youngsters wear only a little shirt in warm weather). I found none. Once more, amid continued howling, I went over the leg carefully, recalling all the signs of fracture I had ever heard of. And then—I discovered he had broken—his *toenail!* Well, I admit this may be very painful, but in my eyes it did not seem bad enough for such a *tamasha!* However, east is east, and boys are boys, so I put a few yards of bandage on the suffering member and apparently satisfied the whole school. The howling ceased as evidence of the

"Salaam, Mem Sahib! Salaam, Sister ji!"

wondrous power of my ministrations, and now, every time I pass the institution, the children all shout: "Salaam, Mem Sahib! Salaam, Sister ji!"

When we returned to the hospital, we took with us a mother and her two-and-a-half-year-old child. The little mite weighed only twelve pounds! She was a pathetic sight—only skin and bones, with an abcess under one ear, infected eyes, and her head caked with crusts. I thought it would be nice to soften and remove these last, but alas! for my solicitude! The minute the cotton wool touched her, the skin, crusts and all, came off in my hands. I had never seen anything like it, and covered it up quickly as a case best reserved for the doctor. At the hospital, Dr. Lalinsky opened the abcess and prescribed several medicines which I promised to give every day, but we have never seen the mother or baby since. I am sure Mary Carmel—as I named her—is in a better home by now.

The other days were just like the first, only sometimes the faces changed. The ones I enjoyed seeing most were the poor, old beggars, who came daily. I could not give them food or money, but I did give them cough medicine, quinine or any other little thing they needed, together with a kind word and a little prayer. There was one poor old fellow who came in and lay down on the floor right at the entrance. My first impulse was to put him out, but I decided to let him have a good sleep; it was probably the coolest spot he had ever found.

Now Sister Ann has returned, and I am back once more taking care of my own "mice" at Holy Family Hospital!

Quoting Father Thomas Gavan Duffy

"When you go off to China to save souls, some of us think that the best thing is that you should baptize as many souls as possible. But not at all. The best thing is that you have offered your lives, stripped naked of all self, to become part and parcel of God's will to save the world.

"That is why you are not the only missioners; the whole Church must be missionary, too. You are indeed the point of the needle; but where the point goes, the whole needle must go, too. Some are there, and some are here; some of us priests and some of us lay; but all of us must be part and parcel of God's will to save the world. . . .

"We missioners may be the lamps shining in the frightful darkness of heathendom—often battered, stained, and broken lamps—but you at home with the dull routine of daily life made priceless by its union with God's Will to save, are the oil without which the lamp is of no avail, but with which you and we together can make to shine, across all the world, Jesus Who is the Light of Time and of Eternity.

"It is in following out the same idea that we declare that a country becomes truly Catholic as soon as it becomes mission minded. . . ."—THE FAR EAST, December, 1938.

Psychologically speaking, very few things in this world matter at all, provided that courage is there to bear them, for it is courage which makes us trust God and our fellow man, courage which gives grit and makes us smile, courage which draws friends to us as the honey attracts the bee. . . .

Those who have thus eulogised the value of suffering, and its support by courage are, probably unconsciously, expressing in poetical language a profound psychological principle. . . .

It is indeed true to say that every time you smile you banish trouble further and further away, because laughter makes us hold up our heads, use our breathing muscles by taking deep breaths—all of which add to the protective and curative powers of the body.—From *The Psychology of Nursing*, THE CATHOLIC NURSE, January, 1939.

at home MEDICAL MISSION SISTERS and abroad

Washington

Address: Medical Mission House
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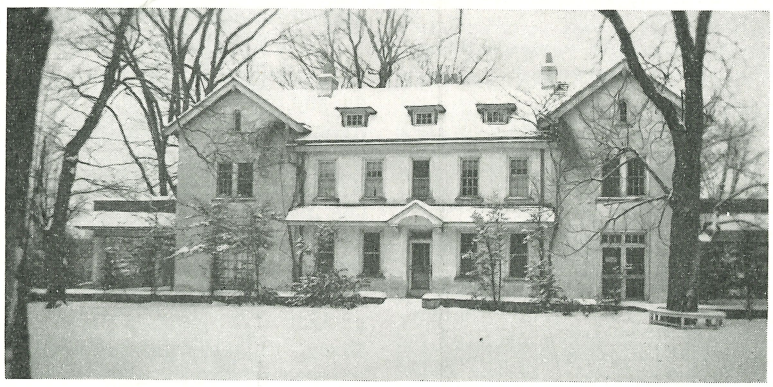
Brookland, D. C.

"Everything comes to him who waits!" For several years we have prayed and worked for a permanent Motherhouse. After a long search we found a suitable estate on the Feast of the Little Flower, and on March 1 the deed is ours!

First of all, a fervent "DEO GRATIAS," and then also a heartfelt and sincere thanks to our heavenly and earthly helpers! It means a great deal to have the foundation on which to develop and build. To start with, a small group of sisters is taking up residence in a small bungalow on the property while the necessary repairs and alterations will be undertaken in the main house, which has not been occupied for six years!



—Photo by Arthur Appell.

The New Motherhouse

The joys and adventures of pioneering are once more ours!

Departure

On March 10, a veteran and a very new recruit will sail from New York for Dacca, Bengal, India. Sister M. Laetitia, R.N., who has already spent ten years between the Society's houses in Dacca and Rawalpindi, will return to the Mitford Municipal Hospital, after having been away from India for about eighteen months. Her companion on the journey will be Sister M. Cecilia, R.N., of Ashton-under-Lyne, Lancashire, England, who made her first profession in the Society on February 11.

The two missionaries will stop *en route* at the Medical Mission House in Osterley, England, and then continue to Bombay, where they will land on April 13. We wish them a pleasant voyage and a happy landing! Sister Cecilia will probably have a hard time of it—she has been Sister Laetitia's language pupil for the past eighteen months, and there will be scant chance for playing hookey on shipboard, with "water, water everywhere"!

Profession and Reception

Pigeonholing events according to importance is just a hopeless task, with missionaries departing for the field, "pioneering" in the new Motherhouse, and making profession. One can only take the events as they come—or as they came! And that brings us at last to our big Feast Day of February 11, when five Sisters made their first profession and ten candidates received the habit and entered upon their novitiate.

Those who made their vows and mission oath are: Sister M. Agatha Ypma, R.N., Utrecht, Holland; Sister M. Alphonsa Breath, New Orleans, La.; Sister M. Peter Martini, New Haven, Conn.; Sister M. Clare Carroll, Baltimore, Md.; and Sister M. Cecilia Wade, R.N.

The following received the habit and entered the Novitiate of the Society: Miss Josephine Dobler, Appenzell, Switzerland, in religion Sister M. Hildegarde; Miss Gertrude Vis, Hoorn,

Holland, Sister M. Gertrude; Miss Martha Paulus, R.N., St. Louis, Mo., Sister M. Dolores; Miss Johanna Raaphorst, R.N., Lisse, Holland, Sister M. Rosina; Miss Eileen Niedfield, Brooklyn, N. Y., Sister M. Frederick; Miss Mary K. Towne, Dayton, Ohio, Sister M. Philip; Miss Johanna Kooter, Wognum, Holland, Sister M. Augustine; Miss Ann Rita Green, Council Bluffs, Iowa, Sister M. Regina; Miss Eileen Roache, Brooklyn, N. Y., Sister M. Renée; and Miss Henrica Schafstall, Sgraveland, Holland, Sister M. Henrietta.

Left to right: Sisters M. Agatha, M. Peter, M. Clare, M. Cecilia, and M. Alphonsa

The ceremony concluded an eight-day retreat given by the Rev. Joseph P. McSorley, C.S.P. Once again the Rev. Francis Goodall, C.S.C., put the chapel of the Holy Cross Foreign Mission Seminary at our disposal, and it was possible to accommodate a number of friends and relatives, besides our own growing family. The Rev. Thomas Kelly, C.S.C., of Holy Cross College, was the celebrant of the High Mass, assisted by the Rev. Francis J. Burton, C.S.C., of the Holy Cross Foreign Mission Seminary and Frater Theophane, O.F.M., of the Franciscan Monastery, brother of Sister Clare.

The sermon was delivered by Father McSorley who, in honor of St. Bernadette, chose the following text:

"Unless Ye Become As Little Children, Ye Shall Not Enter the Kingdom of Heaven"

"This is primarily a day of joy, because it records an achievement. Something has been accomplished, a phase of life has been successfully finished. The eyes of experts have measured and weighed your qualifications. You have been approved, and now, in the name of our Holy Mother the Church, you are being proclaimed fit to wear the uniform, or to carry the banner, of religious life, to go forth as messengers of God. We, your friends, rejoice with you. We congratulate you. We are praying for one thing only, that you shall, all your lives, be perfectly faithful to this consecration of yourselves. We call it a consecration; that is, a giving with joyfulness, without reserve—giving as God gives, in order that we may become God-like. That is the apostolic vocation which now is to be yours.

"The text indicates very clearly the extraordinary—from the human point of view, the incredible—means by which your mission is going to be carried through to successful accomplishment. Not wisdom, nor learning nor material strength, but the qualities of children—that is what is required of you, and by these you are going to win the world.

"This morning, by a happy coincidence, we celebrate a Feast which, I think we may say, is a sort of unique illustration in human history of the truth of this rule of life, this standard, this guarantee of success which we find in our Lord's words. Who more than Bernadette was unfitted from a human point of view to produce an impression upon the world? This little insignificant, obscure girl was without any title to greatness that the eye could detect, without any chance of success that the wildest imagination could conceive—certainly a symbol of helpless childhood! Yet she stands up by the power of God and does what she has done. . . .

"If you would wish to share her spiritual success, then you must undertake to become great as she was great. You must become like children; you must cultivate in yourselves a sense of the unseen, a spirit of faith, a closeness to God which makes you stress the spiritual and despise the material. If you are going to be childlike, if you are going to share the characteristics of Bernadette as you share her vocation, to convert men from sin and bring souls to the knowledge of God, then your sense of the unseen, eternal things must be much more real and much more present to you than anything you can touch with your hand and see with your eyes.

"It is typical of a child to place little value upon things that the world values, and to be transformed with ease to the invisible world. It is characteristic of a child to trust—we do not expect a child to be sophisticated, to be cynical, to be suspicious, to be on guard, to take measures to protect itself. A child will take your hand and be quite content to be guided by you, to be directed as you choose. That is typical of a child; that is characteristic of Bernadette. That has to be typical and characteristic of you if you are going to realize your vocation, if you are going to achieve what God has destined you to achieve. You are going to take every step in step with Him, taking His hand and going withersoever He chooses, just as a little child. You are going to resemble God in the unqualified generosity, the unselfishness with which you are ready to give!

"As a rule, children have very little to give. That is why it is not the value of the gift that is of importance—it is not *that* which we appreciate when a child gives generously what the child prizes and nobody else needs. It is the spirit of giving. Please God, that is going to be your spirit as long as you live. You are going to love to give better than to receive, better than everything else. Whatever you have you will give gladly, joyfully, never stopping to count or measure the amount, the degree of your gift, but giving as Bernadette, as our Blessed Mother, as our Lord have given—giving as God gives, with divine generosity!

"It is not easy—*but it is simple!* There is nothing else required in order that you should be like little children, like Bernadette. Nothing is necessary but your good will and God's grace. God's grace we can count upon, and, please God, we can count upon your good will! Let your attitude towards God, your attitude towards people, your attitude towards things, be just what it is at this moment. Let this spirit of unselfish consecration be yours till death, and you will be fit companions of Bernadette and worthy of the Kingdom of God."

Sister M. Cecilia, R.N.

Feasts and Fasts

Here we are in the middle of Lent, and yet even in this time of penance and fasting, how gently our Holy Mother the Church guides us and tempers her ascetism with feasts in which we can express simply and fully our joys, our gratitude, and even our ambitions—which are always for Her.

On March 17 comes St. Patrick with a bit of green shamrock—harbinger of spring. From such a spontaneous joy, it is easy to slip into a spirit of gratitude and thankfulness when the Feast of St. Joseph comes along—on March 20, this year, since Laetare Sunday falls on the 19th. The Feast brings with it to the Medical Mission House a certain solemnity; St. Joseph was our first resort when the initial steps were taken on

Sister M. Laetitia, R.N.

the long, long trail that led at last to the Motherhouse. The house became ours on the first day of St. Joseph's month, which fell on a Wednesday, the day of the week especially dedicated to him. On March 20 we will gather up all our gratitude and present it to our faithful Patron and Provider like a great bouquet. May we ask our readers to join with us for just one moment on that Feast and say: "Thank you, St. Joseph, for your goodness to the Medical Mission Sisters!"

"Causa Nostrae Laetitiae!"

As a climax to the consciousness of the mystery of life and spring, and to the obligation of gratitude, comes the patronal feast of the Society, the Feast of the Annunciation, March 25. "This was chosen as the patronal feast of the Society because on that day Our Lady, by accepting the trials and sorrows attendant on being the Mother of God, became the CAUSE OF OUR JOY." Here we see the dignity of womanhood, the sanctity of Motherhood, the nobility of service: "*Ecce ancilla Domini.*"

Little Things

This month we have been able to cross off some of the items on our ABC list—it is rather thrilling to see a box come in and find a want fulfilled. But just as thrilling is the receiving of little things which we forgot, but which someone else was interested enough to think of for us, and good enough to give us.

One of the first of these "self-thought" gifts came from Sister Appolonia, of the Oblate Sisters of Baltimore. While visiting St. Joseph's Hospital in that city, she stopped by to greet our two internes, Drs. Eleanor Lippits and Leonie Tummers.

England

Address: Medical Mission House
98 Thornbury Road
Osterley, Middlesex, England

Monsignor Telford Honored by Pope

Our society joins with Right Reverend Monsignor George Telford's many friends in congratulating him on his elevation to the dignity of Domestic Prelate on the occasion of the centenary of the Association for the Propagation of the Faith in England.

Monsignor Telford studied at St. Edmund's College, Ware. He was ordained to the priesthood in 1923 and did parish work from then until 1932, when he was appointed assistant to Monsignor Basil Gudgeon, director of the Association for the Propagation of the Faith. When, because of failing health, Monsignor Gudgeon could no longer carry on the work, Monsignor Telford succeeded him as director.

Our house in Osterley owes a great debt of gratitude to the late Monsignor Gudgeon for his zealous efforts in helping us to make our work better known. He invited us to participate in the Missionary Exhibit given by the Association for the Propagation of the Faith. The phase of mission work the society was invited to display was an Indian hospital, which was easy for us as we had a model of Holy Family Hospital on hand.

As director of the Association for the Propagation of the Faith, Monsignor Telford has worked untiringly to arouse interest in the missions by helping to put before the public the work of the different mission organizations. We rejoice in the honor bestowed upon him by the late Holy Father.

Rawalpindi

Address: Holy Family Hospital
Murree Road
Rawalpindi, Punjab, India

Annual Report, Jan. 1 to Dec. 31, 1938

The annual report of Holy Family Hospital and St. Francis Dispensary is as follows:

Admissions	**1,160**
Total number of hospital days	**11,188**
Out-patients	**12,280**
Operations	**540**
Labor cases	**175**
Deaths	**65**
Medical Mission Sisters—Staff:	
Doctor (Assisted by 1 lay doctor)	**1**
Nurses	**5**
Pharmacist	**1**
Medical Technician	**1**
Students	**4**
Native sisters in training	**15**

Sister M. Stephanie on her rounds as Health Visitor.

The work of the Maternity and Child Welfare Center is in charge of Sister M. Stephanie, R.N., whose duty it is to supervise the dhais and nurse dhais of the district assigned to her. The report of the Center work is as follows:

	Cases attended
56 dhais	**589**
11 nurse dhais	**61**
11 dhais in training	**46**
Dhai's name unknown	**65**
Hospital deliveries	**5**
Doctor in charge	**4**

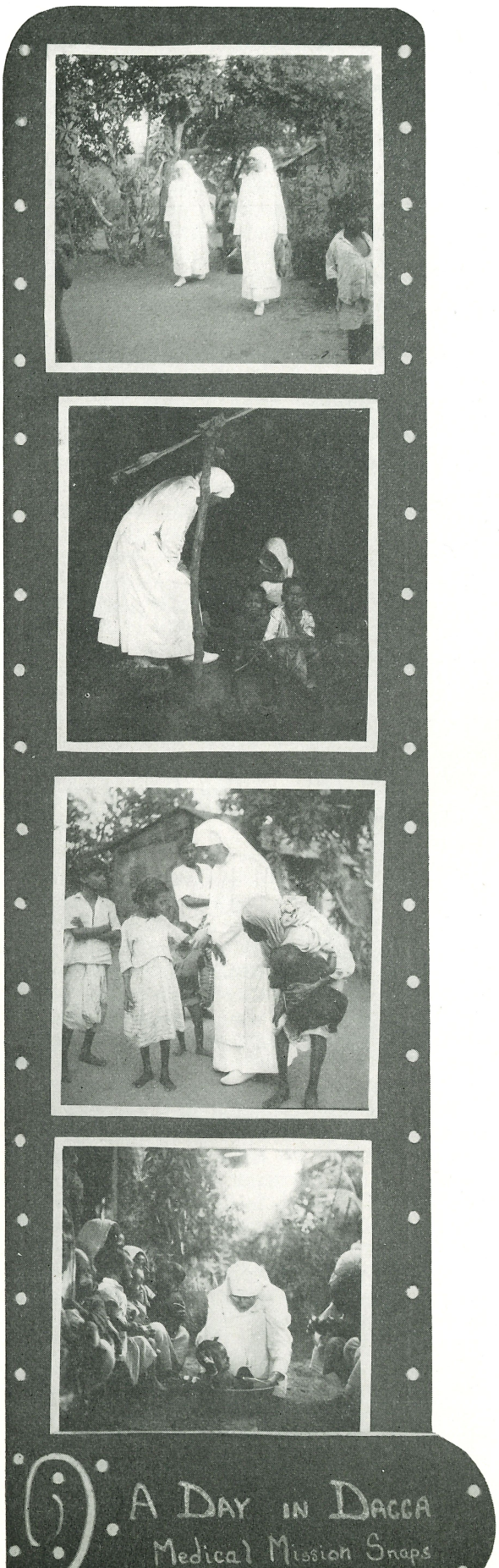
To the report, Sister Stephanie adds this note: "It is impossible to get complete records. There are babies reported as just being born when they are already one month old—it is no wonder that Indians do not know how old they are! There are babies who live almost on my doorstep, and I have never received any birth report. So much for the work still to be done.

"The dhais I have under training at present are fairly good. They have attended about 65 cases, several outside the district, which is indeed very encouraging. For the coming year, I have 15 dhais on roll and three will be ready to take the examination."

India Has Its Galahads, Too!

Beauty may be only skin deep, as the saying goes, but gallantry, so it would seem, is "something in the soul of man!" Sister Camillus bases this contention on a little episode she witnessed from the choir loft in their parish church some weeks ago:

"Sister Jude was in her usual place down in the church, and when Benediction was over, started to make her way out. But she had been surrounded by children who all scrambled into the aisle at once, and there was Sister, not even able to move! As she stood there rather helplessly, a very little boy squeezed through the crowd, took Sister by the hand, ordered the others to stand back in no uncertain terms, and



still holding Sister's hand, escorted her all the way to the door, with all the dignity of a knight of old!"

Happy Heart—Light Feet!

"Yesterday in the dispensary," writes Sister Ann, "I was trying to pour boro-glycerine into a little bottle for a patient. Owing to the cold, it was quite thick and came very slowly.

"'Whistle a little to it, Sister,' said she jocosely, in Urdu. 'Cheer it up—and then it will run!'"

Chords and Discords—A Spring Preview!

Sister Ignatius Marie has not lost her eye for color—with or without harmony. "I wish you could see the vision that is at present walking at a snail's pace from Father's kitchen toward our gate. She has green shoes, the toes of which curl around like a spiral spring—the curly extension really looks like a green snake. (They could never wear such things in Ireland on the 17th of March!) Her trousers are *voluminous,* and of a brilliant red with white spots as large as a silver dollar. On top she has a deep lavender dress that would properly fit someone half her size. Her *chaddar* (veil) is light blue. . . . Well, I suppose she counterbalances a real beauty that I saw earlier this morning. Her trousers were an unusual shade of brown satin, and on top she had a graceful green shawl, of silk and embroidered in the same shade. The costume was so unusual, the colors so exquisitely blended, I could not help wishing I had a color film to take a picture of her."

Dacca

Address: Mitford Municipal Hospital
Dacca, Bengal, India

Annual Report Jan. 1 to Dec. 31, 1938

The work at the hospital has continued as in previous years, with an average of 310 in-patients daily. There are 20 pupil and 5 staff nurses. The Government has promised to provide the Hospital with a night-nursing staff by next April, to consist of 7 pupils and 1 sister.

During the year, 5 pupils passed their examinations in obstetrics, 1 the final nursing examination, and 6 the preliminary nursing examination.

The report for the Narindia Center, in charge of Sister M. Thomas, R.N., is as follows:

Delivery cases attended by the Center	**715**
Antenatals registered	**443**
Houses visited	**3,137**
Toddlers visited	**468**
Dhais in training	**12**

The report for the Urdu Center, in charge of Sister M. Joseph, R.N., is as follows:

Delivery cases attended by the Center	**799**
Mothers visited	**513**
Houses visited	**5,288**
Treatments for minor ailments	**2,454**

Medical Mission Notes

✣✣✣

S.S. Gervase and Protase Church
Kothanalloor, Ettumanoor P.O.
Travancore, South India

Dear Dr. Dengel:

The following details of the suffering millions of India will, I hope, be of profit to the readers of THE MEDICAL MISSIONARY.

The population of India, according to the "Orbis Catholicus" of 1938, is 352,750,000, of which only 3,500,000 are Catholics. The total area of India is 1,808,679 square miles. The chief religion of the country is Hinduism; there are varying forms of worship with innumerable caste distinctions which are characteristic to this country.

The great majority of Indians are poor, so poor that they cannot be said to live, but merely to exist. The natural result of such poverty and hunger is disease—cholera, smallpox, plague, virulent types of fever, dysentery and other tropical diseases. Malaria is very common, and yearly 10,000,000 people are attacked by it, of which 100,000 die. Once attacked by this disease, health is lost unless proper nutrition and medical care are available.

The nature of the country and the people's mode of living help the easy attack and rapid progress of tuberculosis. According to the report published by the consort of the Governor General, who is now trying to find a way to check the disease, 657,871 people died of this disease alone in 1938. The disease is spreading like a wild conflagration. It is reported that 5,000,000 are now actually suffering and no state, no region and no house is exempt. The patients are generally between fifteen and thirty years old, the best period of life for an Indian, and for every man, three women are attacked and die. In an area so extensively affected, there are only forty clinics, and these without proper equipment and staff.

A twelve-year-old wife whose right arm had to be amputated because of advanced tuberculosis of the bone.

The number of lepers in India is 1,000,000, and their condition is better to imagine than to describe. Even their dearest ones abandon them, for all have a great horror of this disease. Cholera, smallpox, pneumonia, typhoid and innumerable other diseases of the tropical countries claim the lives of millions. Some governments make certain provisions, but their attention is restricted to cities and towns; the people of the villages are utterly neglected.

The infant mortality is appalling and the condition of the women very pitiable. Maternity and child-welfare work are little known. All may be astonished to hear that there is not even a good, trained dhai in my district. The village *vayattattis,* as they are called, are untrained and illiterate, and with their many superstitions cause the premature deaths of many young mothers. It would be a blessing for the women if there could be one trained dhai for my village—Indian women are very reserved and they prefer to succumb to their many ills, rather than to be treated by a male doctor.

Dear Doctor and kind readers, I have laid before you a picture of the suffering millions of India in facts and figures. The Catholic institutions that give medical relief to these suffering millions in the whole of India, Burma and Ceylon in sixty-two dioceses, number 42 hospitals, 296 small dispensaries and 13 leper hospitals—a number insignificant when compared to the extent of the country and the number of the sick. Twenty times the number will be too small.

My heart is always moved to pity by the sight of the poor sick and their pitiful cries around me. Very often I shed tears, unable to give them any help. Wholeheartedly I am now engaged to begin a hospital and maternity center. I have no means at my disposal, but I rely on the generous charity of the readers of these lines. I must buy a good site, erect buildings, provide materials and medicines and, above all, persons qualified for the work.

(*Continued on page* 58)

In Our Library

THE TROUBADOUR OF GOD, *by Camille Melloy. Translated from the French by Agnes Franklin Keyes. P. J. Kenedy & Sons. New York,* 1938. 74 *pp.*

We are indebted to Miss Keyes for this exquisite translation of Camille Melloy's beautiful story of *The Troubadour of God.* It is written in such an appealing manner that it will be read by both young and old, Catholic and non-Catholic, with genuine interest.

We see the transition of the gay, tender-hearted son of Peter Bernardone from a joyful, worldly young man into the gentle and still more joyous saint, Francis of Assisi; a saint to whose words the birds of the earth listen and show appreciation of his sermon on God by flapping their little wings and bowing their feathery heads; a saint at whose one glance a savage, man-eating wolf becomes a playful puppy, leaping and gamboling at his side and, at his command, walking sedately to the village, there to humbly bow its head and offer its paw as a token of future good behavior.

One puts the book down with the wish that the world of today would absorb a little of the joyousness and peace of this gentle "Troubadour of God."

"The joy of Easter follows the penance of Lent. But we shall never know true Easter joy until we learn how to keep Lent. Firm trust in Christ enables us to understand and accept suffering, to face the realities of life."—RUSSELL, *Christ, the Leader.*

INTO THY HANDS, *edited by Donald Attwater, T.O.S.D. Liturgical Press, Collegeville, Minn. Third edition,* 1938. 96 *pp. Paper,* 15 *cents.*

Into Thy Hands is the complete Office of Compline for Sunday and every day of the week, arranged in Latin and English for the use of the laity. Compline is the official evening prayer of the Church, and this new edition will be welcomed by the laity who are joining with priests and religious in saying at least some of the Hours of the Divine Office.

Mr. Attwater briefly traces the history of Compline and shows its value for every Christian. The booklet contains the official musical notation in Gregorian for group singing, as well as the rubics for the chanting of the Office in Choir.

MANNER OF SERVING AT LOW MASS, *by Cuthbert Goob, O.S.B. Liturgical Press, Collegeville, Minn. Sixth edition,* 1938. 23 *pp. Paper,* 5 *cents.*

This little booklet, first published in 1927, is now in its sixth edition. It contains all the rubrical directions for the server, as well as general directions with regard to personal bearing, etc. The book is designed as a text for beginners and can be profitably used by every boy serving at the altar.

MARRIAGE IN CHRIST, *by the Rev. Richard E. Power. Liturgical Press, Collegeville, Minn. Third edition,* 1938. 54 *pp. Paper,* 10 *cents.*

Marriage in Christ is the rite of marriage and the Nupital Mass translated into the vernacular. There is a valuable introduction in which Father Powers gives briefly the nature and meaning of the Sacrament. The booklet is intended to help the bridal couple enter upon their holy state in the spirit of the Church.

THE MYSTICAL BODY AND SOCIAL JUSTICE, *compiled and published by St. John's Abbey, Collegeville, Minn.,* 1938. 94 *pp. Paper,* 35 *cents.*

This little volume is intended particularly for the use of study clubs. The work is practical and free from intricate theological speculation, although it sounds the depths of Christian thought. Directors of study clubs will find the book useful and practical in their study of social problems.

THE ADOLESCENT, *by Ada Hart Arlitt, Ph.D. Whitterly House, McGraw-Hill Book Co. New York,* 1938. 242 *pp.* $2.50.

In her treatment of the question of the adolescent boy and girl, Dr. Ada Hart Arlitt has brought out the great importance of early training, which should begin at birth and be strictly maintained up until the thirteenth year. It is hopeless to attempt to inculcate habits and viewpoints at the beginning of adolescence, when the child's outlook on life has entirely altered and his whole world seems to have turned topsy-turvy. His standards as a good citizen should be set up when he tries to undo his first button!

Dr. Arlitt is of the opinion that it is as well to allow the growing child to go his way with discreet guidance, rather than to try to force him with an iron hand. What matter if Sonny comes home with a red scarf, green shoes, and a yellow waistcoat? He will grow out of it! But if his showy clothes are taken away from him, his young urge to attract attention may manifest itself in his merely setting the house on fire!

Perhaps one of the best remarks that the author makes is that the older adolescent is interested in marriage, not as a passing fancy, but as a partnership for life. The book is written in common-sense, popular style, and it should help to solve many of the problems of the older generation in dealing with the younger.

March Mission Intention

"That the rights of Christians may be safeguarded in Palestine and the peace of Christ be promoted in this, the Kingdom of Christ."

The Holy Land is once more a battlefield; where the Angel proclaimed the divine decree of peace to men of good will, enemies are ambushing; where Our Lord pronounced the commandment of charity even to the sacrifice of one's life, soldiers are commanded to spread death. Although the combatants are both non-Christian nations, the greatest danger threatens the Catholic Church. Our sanctuaries are continually exposed to destruction, our ownership of them and right of pilgrimages are subject to constant restrictions under pretext of political reasons.

And yet, the land hallowed by Our Lord's life and death is the dearest and most sacred spot in the whole universe. Our public and private religious practices are inseparable from it. The Church, teaching us divine truths, does it not in abstract terms and reasoning, but rather by taking us in the Sunday and feast day gospels to one or another place in the Holy Land, where we listen to what Our Lord is teaching, and witness what He is doing. Then in sermons and meditations we contemplate how to conform our lives to His words and examples. Thus are the sanctuaries of Palestine the inexhaustible source of religious inspiration for all of us.

It is but natural that the Catholic Church has always desired to possess the Holy Land, or at least the free and open doorway to its sanctuaries. This longing reached its climax in the Crusades of the twelfth century, when the united forces of Europe lifted the banner of Christ on the Temple of Jerusalem. But the Christian dominion lasted only until 1187, when the Moslems took possession of Palestine once more—perhaps it would have been forever, had it not been for one man, St. Francis of Assisi. In 1219, St. Francis started out from Ancona for the Holy Land. He, too, wanted to wrest it from the Mohammedans, not by expelling them from the country of Christ, but by converting them to Christ! For this purpose he raised an army of warriors, a "Crusade," whose arms were prayers and material support of the Holy Land. Ever since that time the Franciscans have persevered in Palestine in spite of suffering and persecutions. More than two hundred of the Friars Minor suffered martyrdom there, but they have saved it for the Church, thanks to the support and prayers of the Army of Crusaders.

It was the wish of the late Holy Father that every Christian should pray for peace in the Holy Land. The easiest way to show an active interest in this intention is to join the Crusade of St. Francis, which has its American headquarters at the Franciscan Monastery, Washington, D. C.—*The Rev. Ralph Denk, O.F.M.*, Commissariat of the Holy Land, Washington, D. C.

MEDICAL MISSION NOTES

(*Continued from page* 56)

I have begun a miniature dispensary and have employed a man doctor, who will be at my disposal for only a few months. From 60 to 130 patients flock to him daily, and I fear within a few days my stock of medicines, etc., will be exhausted. It is conducted in a small house and without the necessary provision for a dispensary.

Also, some five young ladies have volunteered themselves to spend their lives in service of the sick and afflicted. The formation of a native sisterhood on the lines of the Catholic Medical Missionary Sisters of Washington is a pressing need, when we view the present unrest and the daily changing socio-political situations. Vocations are plentiful, but they are to be prepared and made fit.

Dear Doctor, you will understand the problems before me. I beg the readers of these lines sympathy and benefactions on behalf of Christ's poor suffering millions; the help given to these will be the same as done to Christ's person.

Wishing that the Infant Jesus may give you His choicest blessings, I am

Yours very sincerely in Jesus Christ,
FATHER SEBASTIAN PINAKATT.

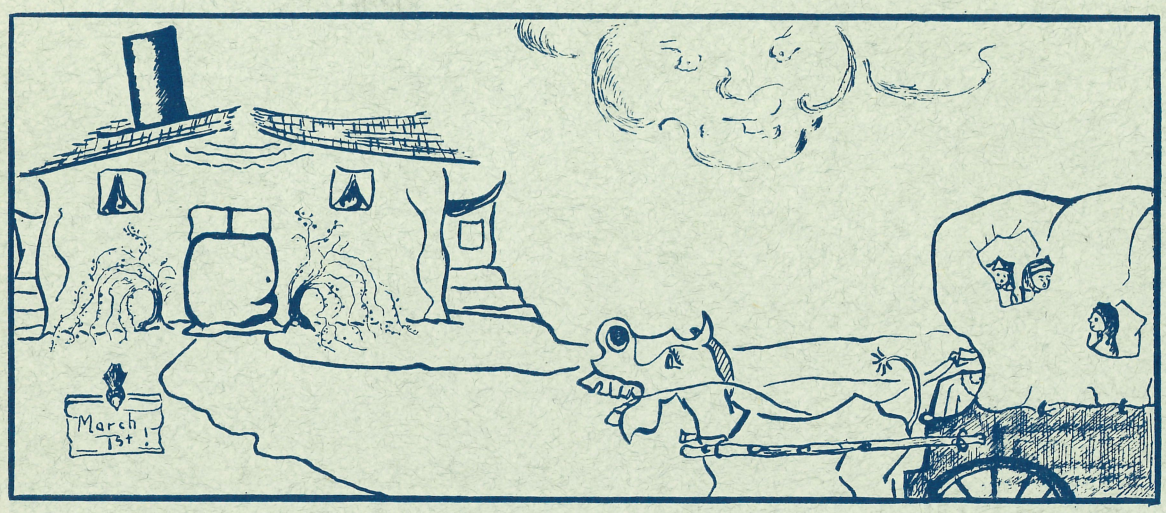
R. I. P.

Please pray for the repose of the souls of:

Very Rev. Peter C. Danner, Pittsburgh, Pa.
Rev. Francis J. Connors, M.M., Maryknoll, N. Y.
Sister M. Felician, Milwaukee, Wis.
Sister Mary Joseph, Washington, D. C.
Brother Matthias, C.S.C., Notre Dame, Ind.
John M. Downing, Manchester, Conn.
(Father of Sister M. Pauline, S.C.M.M.)
Dr. Mary O'Malley, Buffalo, N. Y.
Mrs. B. F. Sauer, Washington, D. C.

Eternal rest give unto them, O Lord:
And let perpetual light shine upon them.
May they rest in peace. Amen.

A "STRAINED" INTERLUDE . . .



". . . HERE THEY ARE, AND *NOT A THING IN THE HOUSE!*"

What an embarrassing moment! If you would like to lend a helping hand to this "hostess" in distress, send any—or *all*—of the following needs to the address below:

Altar, Angelus bell, an ax—and an Auxiliary as active as our Washington one!

Beds, blankets, bedspreads, bureaus, brooms, benches, books, bookcases, basins, brushes—nail, floor, carpet and paint—blackboards.

Crucifixes, a censer, candles, candlesticks, chairs, cabinets, clotheslines, clothespins, coffeepots, a COW.

Dishes, dish pans, dish towels, doormats, desks, a dictionary, dust pans, dust mops, doilies.

Electric fixtures, sewing machine, irons and bulbs; egg beater.

Frigidaire, furniture, files, floor polish and polisher, frying pans, forks.

Garden tools, garden hose, glassware.

Hens, hall stands, hangers, hinges, hammers.

Incense, ironing boards.

Jars (for canning).

Kettles, knives.

Linoleum, lawn mower, ladders.

Mass Missal, mattresses, mops, a mangle, meat grinder—and of course, MONEY!

Napkins, nails (all sizes).

Office equipment, oil cloth.

Pots and pans, pillows and pillow cases, pictures and frames, paint, pins, pliers, pyrex plates.

Quilts.

Rakes, rope.

Stations, surplices, sheets, soap, safe, spoons, spades, scouring powder, sieves, starch, saws, screw-drivers and a spray for fruit trees.

Tabernacle, thurible, tables, tablecloths, TYPEWRITERS, tea pots and tea kettles, trays, tool kit, trowels, thumb tacks, towels—hand and dish.

Umbrellas.

Vases, vacuum cleaner, varnish.

Washing machine, washtubs, washboards, wringers, wheelbarrow, window shades, waste baskets, washcloths.

Xtra odds and ends!

Yarn, yardstick.

Zeros—to add to the balance of the fund left for the Motherhouse!

MEDICAL MISSION SISTERS
Pine Road, Fox Chase
Philadelphia, Pa.